

**CENTRE OF CARDIOLOGY**  
**JAWAHARLAL NEHRU MEDICAL COLLEGE, A.M.U., ALIGARH**  
**Coronary Angiogram Report**

NAME: Ms. Seema Verma AGE/SEX: 42/F DATE: 06-08-19  
REG. NO: C-48819 CADS.: 33832 CATH. NO.: 2987  
Indication: Atypical Chest Pain Approach: RFA  
Catheters: JR Anaesthesia: Xylocain 2% Contrast: visipaque

LEFT MAIN: - LM - Normal

LAD: Type II, Pro vint to mid ectatic  
Distal vessel small calibre  
D1: Diagonal (N)

D2:

RI:

LCX: Lx (OM1, OM2) (N)

OM1:

OM2:

RCA: Rt dominant  
RCA ectatic  
PDA: ostial RCA 2/3.

PLV:

FINAL DIAGNOSIS:

ADV: . Ectatic coronaries  
. Non critical CAD

Self Attested  
Imbannur

Abhishek  
6/8/19  
Consultant  
Centre of Cardiology  
JNMU



# DISCHARGE TICKET

DEPARTMENT OF ..... Cardiology .....

J.N. MEDICAL COLLEGE, AMU, ALIGARH

Patient's Name : Seema Verma

Age/Sex : 42y / F

Ward/Bed : 15

Address : w/o Yogendra R/o Judge Compound  
Aligarh (U.P.) Phone \_\_\_\_\_

CADS No. : 33832 OPD/Cas. No. C-488/19

Date of Admission 6/8/19 Time \_\_\_\_\_

Date of Discharge 9/8/19 Time \_\_\_\_\_

Diagnosis: CAD / CSA (II)

CAC / Ectopic Coronaries / Non Critical CAD  
(6/8/19)

Consultants Prof M.V. Rabbani / Dr. Rafi

Senior Resident \_\_\_\_\_

J.R. 3 \_\_\_\_\_

J.R. 2 Dr. Ansham

J.R. 1 \_\_\_\_\_

*Self Attested*  
[Signature]

Brief History

HTN ⊖  
Smoking ⊖

40. Choking sensation x 1 day  
chest pain & diaphoresis x 1 day

Examinations

Vitals

CFE

SE

BP - 116/74  
PR - 70/min  
RR - 18/min  
SpO2 - 96% on  
air

• Pallor  
• Tachycardia  
• Cyanosis  
• Clubbing  
LAP  
PE  
↑ JVP

Cons - conscious, oriented  
CNS - S1, 2 (N)  
Eyes - B/L clear  
Pupils - equal

Treatment during Admission

ECG - T↓ V1 - V6

Same as yesterday

# INVESTIGATIONS

BS (R) - 70	PLC - $11.5 \times 10^3$	HIV	} NR
BUN - 9	Hb - 11.0	HR <del>50</del>	
S. creat - 0.68	PLT - $239 \times 10^3$	MCV	

LDL - 98.44

HDL - 48

CXR PAU - WNL

TAS → 100

Chol - 156

Trop I :  $< 1.5 \text{ ng/L}$

CAS: (6/8/19)

(repeat)

LM - Normal

LAB: Type II

proximal to mid ectatic

Distal vessel small caliber

TSH - 1.9

T3 - 1.0

T4 - 6.8

D<sub>1</sub>: Diagonal (N)

LCx 10m, 10m<sub>2</sub> (N)

RCx: RF dominant

RCA ectatic

ostial RCA 20%

Adv: Ectatic coronaries

Non critical CAD

Echo (done outside) (5/8/19)

No RWMA: LVEF - 68%

## Treatment on Discharge

- AHA step II diet of 1600 kcal/d
- Tab Clopidogrel A (75/150) x 1 x H/S N
- Tab Lipicure (40) x 1 x H/S N
- Tab Rosuvastatin (20) x 1 x BD 0 0
- Tab Angiotensin TR (6.5) x 1 x BD < 8:30 AM  
4:30 PM
- Tab Nitroglycerin (5) x 1 x BD 0 0
- Tab Dupirent (400) x 1 x B/B/F
- Tab montair LC x 1 x OD (H/S) x 5 days  
2

### Follow Up :

- Hw in cardiology OPD (14) On THURSDAY  
after 2 weeks

Prepared By

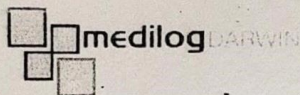
Name : Dr. Awesham

Designation :

Signature

JR  
Aly

Signature of Senior Resident



Demo Hospital  
 Demo Department  
 Demo Address 1  
 Demo Address 2

**SEEMA VERMA,**  
 18-05-1975

## Holter Report

### Patient Details

Name SEEMA VERMA  
 ID  
 Age 44 Date of birth: 18-05-1975  
 Gender F  
 Address  
 Phone

Rec. start 08-08-2019 12:44:01  
 Length 21:12:06  
 Recorder AR12plus BT (8669/6.5 3.19)  
 Ref.Doc. PROF. M. U. RABBANI  
 Contact

Reason f.rec	
Medication	

### General

# beats 98016  
 V beats 5 (0.01%)  
 SV beats 98011 (99.99%)  
 Paced beats 0 (0.00%)  
 BBB 0 (0.00%)  
 Junction 0 (0.00%)  
 AFib/AFL 0/0  
 AFib/AFL% 0%/0% of recording  
 Artefacts% 0.00%

### Heartrate and HRV

Min. HR 60 @ 04:47:23  
 Max. HR 129 @ 14:30:29  
 Ø HR 78  
 Ø HR Day 80  
 Ø HR Night 75  
 # beats in Tachy 63 (130 BpM) 0.04%  
 # beats in Brady 0 (45 BpM) 0.00%  
 Longest Pause --- @ ---

### Ventricular Events

V.ectopic beats 0  
 Couplets Mono: 0 Poly: 0  
 Isolated V 2  
 Bigemini 0  
 Trigemini 0  
 VT 0  
 Most severe VT --- (---) @ ---  
 NSVT 0  
 Salvo 0  
 IVR 0

### Supraventricular Events

Pause 0  
 Tachycardia 1  
 Most severe SVT 30.3 sec (defined by length)  
 with 131 bpm @ 14:30  
 Bradycardia 0  
 Most severe Brady --- (defined by length)  
 with --- @ ---  
 PSVT 0  
 Irreg. Rhythm 0  
 SV Ectopic beats 0

### ST Analysis

A ST analysis has been performed.  
 Minimum ST level was found at 13:09:35 with -2.24mm depression in channel 3.

### Diagnosis

Min HR 60  
 max 129/nd  
 No significant Arrhythmias  
 ST ↓ with ↑ HR  
 No Pauses

Advised clinical correlation

*Self Attested*  
*[Signature]*

*[Signature]*  
 10/8/19